



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

08/092974

Date: July 16, 1993  
File No. 10369-900100

Commissioner of Patents  
and Trademarks  
Washington, DC 20231

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I HEREBY CERTIFY THAT THIS PAPER OR FEE IS  
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Sir: 1-00ETAI

TYPED NAME MICHAEL MONFERDINI

SIGNED Michael Monferdini

Transmitted herewith for filing is the patent application of Inventor(s):  
Louis B. Rosenberg and Bernard G. Jackson

Title: THREE-DIMENSIONAL MECHANICAL MOUSE

Enclosed are also:

- \_\_\_ Prior Art Statement (IDS)  
X 7 Sheets of drawing, Formal \_\_\_, Informal X  
\_\_\_ An Assignment of the invention to: \_\_\_\_\_  
\_\_\_ Recordation Form Cover Sheet (Form PTO-1595)  
\_\_\_ Power of Attorney by Assignee & Exclusion of Inventor Under 37 CFR 1.32  
\_\_\_ Combined Declaration and Power of Attorney for Patent Application  
\_\_\_ Declaration for Patent Application  
\_\_\_ Associate Power of Attorney  
\_\_\_ Small Entity Status Declaration Under 37 CFR 1.9(f) and 1.27(c)

OR:	(Col. 1) NO. FILED	(Col. 2) NO. EXTRA	SMALL ENTITY RATE	FEE	OR	OTHER THAN A SMALL ENTITY RATE	FEE
ASIC FEE				\$ 355	OR		\$ 710
TOTAL CLAIMS	<u>26</u> - <u>20</u> = *	<u>6</u>	x11 =	\$ <u>66</u>	OR	x22 =	\$ _____
NDEP CLAIMS	<u>4</u> - <u>3</u> = *	<u>1</u>	x37 =	\$ <u>37</u>	OR	x74 =	\$ _____
] MULTIPLE DEPENDENT CLAIM PRESENTED			+115 =	\$ _____	OR	+230 =	\$ _____
If the difference in Col. 1 is less than zero, enter "0" in Col. 2.			TOTAL	\$ <u>458</u>	OR	TOTAL	\$ _____

\_\_\_ Our Check No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_ to cover the filing fee and assignment recording fee is enclosed.

\_\_\_ The Commissioner is hereby authorized to charge the filing fees to Deposit Account No. \_\_\_\_\_ (Order No. \_\_\_\_\_). Two copies of this sheet are enclosed.

\_\_\_ Priority of application Serial No. \_\_\_\_\_ filed on \_\_\_\_\_ in \_\_\_\_\_ is claimed under 35 U.S.C. 119.

\_\_\_ The certified copy has been filed in prior application Serial No. \_\_\_\_\_ filed on \_\_\_\_\_.

\_\_\_ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 23-0439 (Order No. \_\_\_\_\_). Two copies of this sheet are enclosed.

Respectfully submitted,

  
Paula Chavez